

**REQUEST FOR MEDIATION
UNDER THE EMPLOYMENT DISPUTE RESOLUTION PLAN
(Confidential)**

TO: EDR/Alternate EDR Coordinator _____
[name]

FROM: _____
[Complainant]

Within the preceding 14 days the undersigned was notified of the conclusion of consultation period as to a complaint filed by me under Chapter VIII, § 5(B) of this court's Employment Dispute Resolution Plan. Pursuant to Chapter VIII, § 6(A)(1.) the undersigned hereby requests mediation of the following claim(s):

I.

A. For a complaint alleging discrimination, check and identify as many categories as are applicable:

☐ Race ☐ Color ☐ National Origin ☐ Age
☐ Religion ☐ Gender ☐ Disability

B. Date(s) of alleged discrimination: _____

C. Please identify by name and position the official(s) you believe discriminated against you: _____

II.

A. For each and every matter as to which mediation is now sought (including complaints of discrimination), specify below all events and occurrences giving rise to your complaint, and how you believe you were improperly treated or treated differently from other employees or applicants. (List here the section(s) of the Employment Dispute Resolution Plan which specify right(s) believed to have been violated.)

B. Corrective action sought by you:

C. Do you have an attorney or other person to represent you? ☐ Yes ☐ No

If yes, name and address of attorney or representative:

Signature

Date

ACTION TAKEN BY EDR COORDINATOR

TO: _____

After consultation with the chief judge in reference to your claim as stated above, the following action is taken:

_____ This matter is referred to mediation pursuant to Chapter VIII § 6 of the EDR Plan for the Northern District of Georgia

OR

_____ This matter is not suitable for mediation and you are advised that you may request a hearing within 14 days from receipt of this notice pursuant to Chapter VIII § 6A and Chapter VIII § 7A of the EDR Plan for the Northern District of Georgia.

EDR COORDINATOR

DATE